

Mozambique Malaria

Year 1
Quarterly Report
July - September 2011

October 28th, 2011

Quarterly Overview

Reporting Country	Mozambique Malaria
Lead Partner	FHI
Collaborating Partne	ers
Date Report Sent	22/10/2011
From	Dário Sacur, Project Director,
	TB CARE I/Mozambique
То	Alfredo MacArthur, Activity
	Manager for TB CARE I,
	USAID/Mozambique
Reporting Period	July-September 2011

Technical Areas	% Completion
9. Malaria	54%
Overall work plan completion	54%

Most Significant Achievements

1. Antimalarial drug efficacy monitoring

In Mozambique, the treatment of uncomplicated falciparum *Plasmodium* malaria is performed using both combinations of Artemether-Lumefantrine and Artesunate-Amodiaquine in fixed dose combination.

Resistance of falciparum *Plasmodium* to the most common used antimalarials represents a serious treat to efforts on malaria treatment and its control. Thus, regular monitoring of these drugs efficacy represents an important tool for the provision of adequate evidence based treatment policy formulation. Since its introduction in 2005, no studies were carried out to test the therapeutic efficacy of the Artemeter-Lumefantrine combination in the country. The present study is aimed to monitor the therapeutic efficacy of Artemether-Lumefantrine and Artesunate-Amodiaquine combinations in five sentinel sites:

Northern region - Hospital Rural de Montepuez, Cabo Delgado province

Central region - Centro de Saúde de Dondo, Sofala province and Tete hospital, Tete province

Southern region - Hospital Rural de Chokwe, Gaza Province and Centro de Saúde, Manhiça, Maputo province

2. Monitoring and evaluation

The NMCP is reviewing all its major documents: the National Malaria Policy, the National Malaria Strategic Plan and the M&E plan. The first document has been finalized. A consultant has been identified to finalize the strategic plan and we expect that the work will be concluded during the month of October 2011. The M&E plan is being finalized by MACEPA.

3. Cascade Training for laboratory technicians

During this quarter the project trained 497 (47,6% of the total planned) laboratory staff. The cascade training was conducted in 6 provinces, namely Maputo city, Maputo Province, Gaza, Inhambane, Tete, and Manica. We anticipate that all lab staff will be trained by November, 2011.

To ensure a high quality, the trainings are being conducted by a selected group of facilitators using a standard methodology. Training materials, including a facilitator manual have been developed.

4. Printing of NMCP materials

The project supported the printing and distribution of 8000 copies of malaria guidelines and 8000 copies of treatment algorithms and charts. All these materials have been delivered to NMCP.

Overall work plan implementation status

With the exception of some M&E activities, all other activities planned for the quarter have been successfully implemented. In terms of M&E, the procurement of IT equipment for the NMCP was finalized but other planned activities were not implemented because the NMCP M&E focal point left the post. However, since an aditional three months extension has been aproved for TB CARE and hence for malaria, it is believed that part of these activities may be realized.

The overall work planimplementation status to date is about 54%.

Technical and administrative challenges

There is a need to procure a significant amount of cell counters to be used during the malaria laboratory cascade training, for parasite density determination. This procurement was not initially planned.

Has mentioned in the previous report, and despite the fact that considerable part of the study has been completed in three sites, there is a need to extend the period of the drug efficacy study. We are still in the low transmission season which impacts in the rate of recruitment of study participants.

Quarterly Technical Outcome Report

Technical Area 9. Malaria								
Exp	ected Outcomes	Outcome Indicators	Indicator Definition	Baseline	Target Y1	Result Y1	Highlights of the Quarter	Challenges and Next Steps to Reach the
		Indicators			".	'.		Target
1.1	health facilities	% of Malaria cases managed according to National guidelines	Numerator: Number of Malaria cases managed according National guidelines Denominator: Total number of Malaria cases notified at the health facility	59 (HFS 2006)	100		Training curricula finalized	Resources for the clinical training. Activities affecting this indicator were planned to take place between July and September 2011
1.2	and treatment expanded to	% of Malaria cases diagnosed through Rapid Diagnostic Tests by community health workers	Numerator: Number of Malaria cases diagnosed through Rapid Diagnostic Tests by community health workers Denominator: Total number of people with symptoms of fever	0	30		RDT quantification	Cascade training to take place up to November 2011
	and treatment expanded to community level	% of Malaria cases treated by community health workers	Numerator: Number of Malaria cases treated by community health workers Denominator: Total number of Malaria cases diagnosed through Rapid Diagnostic Tests by community health workers		10		Data collection tool finalized	Treatment done, but no report on cases treated
1.3	Malaria data management system strengthened	% of health facilities reporting correctly and timely Malaria cases	Numerator: Number of health facilities that reported Malaria cases correctly and on time Denominator: Total number of health facilities in the district	90	100		Started updating of the M&E plan	No info on the quality (correctly reported)

Quarterly Activity Plan Report

Outcomes	Outcom e 1.1	9. Malaria				Planned Completion		
			Lead Partner	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
Malaria diagnostic	1.1.1	Reference materials produced and distributed	FHI		1 00%	Sep	2011	Materials have been delivered to NMCP
system	1.1.2	Training courses for laboratory staff and VHWs organized	FHI		60%	Nov	2011	ToT training concluded. Cascade training has initiated and concluded in 6 provinces
	1.1.3	Supportive supervision conducted	FHI		35%	Dec	2011	Planed to start in November 2011.
	1.1.4	Internal Quality Assurance system set-up	FHI		35%	Dec	2011	Consultant identified and TORs defined
Outcomes	Outcom		Lead	Approved	Cumulative	Month	Year	Cumulative Progress and
	e 1.2		Partner	Budget	Completion			Deliverables up-to-date
Drug efficacy	1.2.1	Study protocol designed	FHI		1 00%	April	2011	
study	1.2.2	Protocol approved	FHI		1 00%	May	2011	
	1.2.3	Study implemented	FHI		85%	Nov		One arm completed in three sites
	1.2.4	Drug policy adjusted	FHI		0 %	Jan	2012	Will be done after the study
Outcomes	Outcom		Lead	Approved	Cumulative	Month	Year	Cumulative Progress and
	e 1.3		Partner	Budget	Completion			Deliverables up-to-date
M&E system	1.3.1	Staff trained in GIS-based M&E system	FHI		0 %	March		To postpone to 2012
	1.3.2	GIS-based M&E system developed	FHI		0 %	March	2012	
	1.3.3	Staff in provinces supervised	FHI		0 35%	March	2012	
Outcomes	Outcom		Lead	Approved	Cumulative	Month	Year	Cumulative Progress and
	e 1.3		Partner	Budget	Completion			Deliverables up-to-date
Coordination	1.4.1	Platform for laboratory stakeholders established	FHI		60%	Nov	2011	
	1.4.2	Coordination activities organized	FHI		90%			ongoing
					54%			

Quarterly Activity Plan Modifications

Request for Cancellation or Discontinuation of Activities										
Approved By (write dates)		Old		Lead	Remaining	New	Replace with the following	Lead	Proposed	
Mission	PMU	USAID	Code	Activities from the Work Plan	Partner	Budget	Code	activity (if any)	Partner	Budget*
				{Copy from the work plan}						

^{*} Detailed budget is attached

Request for Postponement of Activities to Next Year								
Approved By (write dates)			Old		Lead	Remaining		
Mission	PMU	USAID	Code	Activities from the Work Plan	Partner	Budget		
				Supportive supervision conducted	FHI /	To be complete		
					Масера	_		
				Drug policy adjusted	FHI	To be complete		
				Staff trained in GIS-based M&E	FHI	To be complete		
				system				
				GIS-based M&E system developed	FHI	To be complet		
				Staff in provinces supervised	FHI	To be complete		

Approved By (write dates)				Lead	Proposed	
PMU	USAID	Code	Proposed New Activities	Partner	Budget*	
			Procurement of cell counters for the Malaria laboratory cascade training (parasite density determination)	FHI	30,000	
			Procurement of a five-head microscopy for training purposes	FHI	35,000,00	
			Extend drug efficacy study for three months	FHI	25,000	
				PMU USAID Code Proposed New Activities Procurement of cell counters for the Malaria laboratory cascade training (parasite density determination) Procurement of a five-head microscopy for training purposes Extend drug efficacy study for	PMU USAID Code Proposed New Activities Partner Procurement of cell counters for the Malaria laboratory cascade training (parasite density determination) Procurement of a five-head microscopy for training purposes Extend drug efficacy study for FHI	

^{*} Detailed budget is attached

Quarterly Photos (as well as tables, charts and other relevant materials)